

**MULTIPLE DEPENDENT CLAIM
FEE CALCULATION SHEET**
(FOR USE WITH FORM PTO-875)

SERIAL NO.

10/585206

FILING DATE

28 MAR 2007

APPLICANT(S)

CLAIMS

	AS FILED		AFTER 1 st AMENDMENT		AFTER 2 nd AMENDMENT	
	IND.	DEP.	IND.	DEP.	IND.	DEP.
1	/		/			
2	/		/			
3	/		/			
4		/		/		
5	/		/			
6		/		/		
7		4		/		
8		0		/		
9		0		/		
10	/			/		
11	/			/		
12		/		/		
13		1		/		
14		0		/		
15		1		/		
16		1		/		
17		0		/		
18		0		/		
19		0		/		
20		0		/		
21				4		
22				4		
23				4		
24			/			
25			/			
26			/			
27				1		
28				2		
29			/			
30				1		
31				4		
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49						
50						
TOTAL IND.	6	↓	8	↓		↓
TOTAL DEP.	17	←	34	←		←
TOTAL CLAIMS	23		42			

	AS FILED		AFTER 1 st AMENDMENT		AFTER 2 nd AMENDMENT	
	IND.	DEP.	IND.	DEP.	IND.	DEP.
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99						
100						
TOTAL IND.		↓		↓		↓
TOTAL DEP.		←		←		←
TOTAL CLAIMS						